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|   |  |   |
|---|--|---|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i> |  | Docket Number (Optional)<br><b>6046-101N5</b> |
| Application Number <b>09/316,430</b>  |  | Filed <b>May 21, 1999</b>                     |
| For <b>METHOD AND APPARATUS FOR COMPUTERIZED HANDLING OF PROPOSALS</b>  |  |   |
| Art Unit <b>2165</b>  |  | Examiner <b>Garg, Y.</b>                      |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

|  | Fee    | Small Entity Fee |                  |
|--|--------|------------------|------------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | \$120  | \$60             | \$ _____         |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | \$450  | \$225            | \$ _____         |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510            | \$ <u>510.00</u> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))             | \$1590 | \$795            | \$ _____         |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))             | \$2160 | \$1080           | \$ _____         |

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1636. I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 17,350

☐ attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

/Reena Kuyper/  
Signature

Jan. 20, 2006  
Date

Reena Kuyper  
Typed or printed name

(310) 247-2860  
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

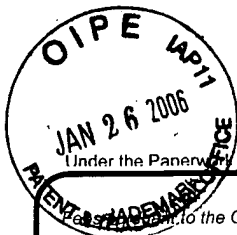
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Effective on 12/08/2004.

As required by the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 760.00

**Complete if Known**

Application Number 09/316,430

Filing Date May 21, 1999

First Named Inventor Ronald A. KATZ

Examiner Name Garg, Y.

Art Unit 2165

Attorney Docket No. 6046-101N5

**METHOD OF PAYMENT** (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 50-1636 Deposit Account Name: A2D, LP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☐ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

| Fee (\$) | Small Entity Fee (\$) |
|----------|-----------------------|
| 50       | 25                    |
| 200      | 100                   |
| 360      | 180                   |

Each independent claim over 3 (including Reissues)

Multiple dependent claims

|                          |              |          |               |
|--------------------------|--------------|----------|---------------|
| Total Claims             | Extra Claims | Fee (\$) | Fee Paid (\$) |
| _____ - 20 or HP = _____ | x _____      | = _____  |               |

|                           |
|---------------------------|
| Multiple Dependent Claims |
| Fee (\$) Fee Paid (\$)    |

HP = highest number of total claims paid for, if greater than 20.

|                         |              |          |               |
|-------------------------|--------------|----------|---------------|
| Indep. Claims           | Extra Claims | Fee (\$) | Fee Paid (\$) |
| _____ - 3 or HP = _____ | x _____      | = _____  |               |

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |              |  |          |               |
|---------------------|--------------|--|----------|---------------|
| Total Sheets        | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
| _____ - 100 = _____ | / 50 = _____ | (round up to a whole number) x _____             | = _____  |               |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for Extension of Time (\$510) and Notice of Appeal (\$250) 760.00

**SUBMITTED BY**

|                   |                |   |                          |
|-------------------|----------------|---|--------------------------|
| Signature         | /Reena Kuyper/ | Registration No.<br>(Attorney/Agent) 33,830 | Telephone (310) 247-2860 |
| Name (Print/Type) | Reena Kuyper   |   | Date Jan. 20, 2006       |

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